

Notification of Hazardous Waste Site

United States Environmental Protection Agency Washington DC 20460

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compensation Section 2015 (Compensation of the Indicate the Letter of the Item)

MN#19

	be mailed by June 9, 1981.	and must	which applies.	910601	·	~ /	
					MNS-0	00-00	31-074
A	Person Required to Notify: Enter the name and address of the person or organization required to notify.		Boov	mann	Service		
			Street 6900	Dixie Au	e east		·
			city Inver G	rove	State	Miny z	ip Code 55075
В	Site Location:		Qc.	C . +) · · · · · · · · · · · · · · · · · · ·	7	
	Enter the common name (if known) and actual location of the site.		Name of Site	preye o	andfill,	1	
			Street Tare	by the K	TOUT I MI.	E of W	ARNER RD.
11	1/190 1/19105		city St Paul	M Bonks.	Dansol	- ;	55106
ΜП	<u>VV98</u> 9609085		<u> </u>	- It I banda V.	State	<u>:</u>	00,00
С	Person to Contact:		Name (Last, First and Ti	110) <u>Baar</u>	Boers.		70000
	Enter the name, title (if applicable), and business telephone number of the person to contact regarding information					rann,	(owner)
			Phone (412)	151-185	5	Bernie	
	submitted on this form.						
_	Dates of Waste Handling:	V 25	. 19 60	1. 107	10	US EPA RECOR	DS CENTER REGION 5
	Enter the years that you estimate	r ro	PEXITO	70 1919	ρ ψ		[]
	treatment, storage, or disposal be		From (Year)	To (Year)	+ . 1		}
	ended at the site.	√).			0 4	~	557273
		1 A	(13en) 191	10 0	revent		
E	Waste Type: Choose the option you prefer to complete						
_							
	Option I: Select general waste types and so you do not know the general waste types or encouraged to describe the site in Item I—D			Option 2: 1 Resource C	This option is ava conservation and	ilable to perso Recovery Act	ons familiar with the (RCRA) Section 3001
				regulations	(40 CFR Part 26	1).	(,
	General Type of Waste: Source of		of Waste:	Specific Ty	pe of Waste:		
	Place an X in the appropriate Place an		X in the appropriate	EPA has as	signed a four-dig	it number to	each hazardous waste 01 of RCRA. Enter th
	boxes. The categories listed overlap. Check each applicable	boxes.		appropriate	four-digit numbe	er in the boxes	provided. A copy of
	category.			the list of h	azardous wastes	and codes ca	n be obtained by
				located.	ine EPA Region s	erving the Sta	ate in which the site
	1. Organics	1. 🗆 Mi	•			·	
	2. Inorganics		enstruction				
	3. ☒ Solvents 4. ☐ Pesticides	3. □ Te 4. □ Fe					
	5. ☐ Heavy metals		per/Printing				ļ
	6. □ Acids		ather Tanning				
	7. □ Bases		n/Steel Foundry		<u> </u>		ļ
	8. PCBs		nemical, General	1 1			
	9. X Mixed Municipal Waste	9. 🗆 Pla	ating/Polishing				
	10. 🖄 Unknown	10. 🗆 Mi	ilitary/Ammunition				
	11. StOther (Specify)	11. 🗆 Ele	ectrical Conductors				
	Part State		ansformers -				
	Tant Judge		ility Companies	ı n	Manii.	1 4 11 4 1	
			initary/Refuse		100011 J	NV1 81	
		15. ☐ Ph	iototinish ib/Hospital			•	
		17. 🗆 Ur	•		•		
		4 4 44	her (Specify)		र । इ	JUN	/ ·
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Form Approved OMB No. 2000-0138

EPA Form 8900-1

	Notification of Hazardous Waste Site	Side Two					
F	Waste Quantity:	Facility Type	Total Facility Waste Amount				
	Place an X in the appropriate boxes to indicate the facility types found at the site.	1. 🗆 Piles	cubic feet UM Knawn				
	In the "total facility waste amount" space	2. ☐ Land Treatment 3. ☑ Landfill	gallons				
	give the estimated combined quantity	3. XI Landfill 4. □ Tanks	Total Facility Area				
	(volume) of hazardous wastes at the site using cubic feet or gallons.	5. Impoundment	square feet Un Known				
	In the "total facility area" space, give the	6. Underground Injection	CH W NOWN				
	estimated area size which the facilities occupy using square feet or acres.	 7. □ Drums, Above Ground 8. □ Drums, Below Ground 	acres				
	· ·	9. Dother (Specify)					
G	Known, Suspected or Likely Releases	to the Environment:	Pian GINO Dundo				
	Known, Suspected or Likely Releases to the Environment: Place an X in the appropriate boxes to indicate any known, suspected, or likely releases of wastes to the environment.						
	Note: Items Hand I are optional. Completing hazardous waste sites. Although completing		ate and local governments in locating and assessing encouraged to do so.				
H	Sketch Map of Site Location: (Options	al)					
	Sketch a map showing streets, highways, routes or other prominent landmarks near	3					
	the site. Place an X on the map to indicate		1				
	the site location. Draw an arrow showing the direction north. You may substitute a		Pi Bo Grove Ho				
	publishing map showing the site location.		Vine Board Grove Ho				
	Pias Eus		1 m Dent				
	17 600		117 1134				
	St Paul Dengard	•					
	Strail >>						
	37 1 aug	Let 1	H-1Nay 52 X				
	Wei River	Wask Treatment Plant	Hi way 52				
	M311324	Plant					
ı	Description of Site: (Optional)		1 1010				
	Describe the history and present conditions of the site. Give directions to	operated by The					
	the site and describe any nearby wells, springs, lakes, or housing. Include such	V V					
	information as how waste was disposed	city of St Paul	under the direction of				
	and where the waste came from. Provide any other information or comments which	J. 1 9 00 1200	Willes 1. Cit = 21 to 18				
	may help describe the site conditions.	9 0 1.1-01	M. L. CI WA				
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	,		Mayor Jamy Coher TRA closed it.				
	^ _	- 1	000 - 11				
	for had failful how owned by Bt 2 13 presently						
	operating, seemryly very well,						
_		0 0					
J	Signature and Title:	Name Durnell Edwa	Bearmann Jervices Rubbah Removal				
	The person or authorized representative (such as plant managers, superintendents,		1 2 Owner, resem				
	trustees or attorneys) of persons required to notify must sign the form and provide a	Street 6900 Dixie x	ve East Description Desc				
	mailing address (if different than address		4.				
	in item A). For other persons providing notification, the signature is optional.	cirv huer broke si	tate MA _{k Zip Code} SSO7) ☐ Operator, Present ☐ Operator, Past				
	Check the boxes which best describe the relationship to the site of the person	Signature Date 5-28-8					
	required to notify. If you are not required Signature Date 5 28-8/						

Respond	ENT CONTACT R	ecord (rcr)	• .		
PACILITY	IO NOWREU	COMPANY NAM			
MN	5000	001074 Bear	man Service	5	
COMPANY	ADURESS		CITY	STATE ADDREV	. ZIP CODS
· · · · · ·					
CONTACT	PERSON'S NAME/TI	TLE		TELEPHONE NUMBER (IN	ICLUDE AIN.A CODE)
•					
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	CONT	ACT RECORD		
DATE	CONTRACTOR'S INITIALS	ITEMS DISCUSSED/RESOLUTION			
7-31	ca.	Ine six'd	on sit	e lora	tion
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